

PARENT PERMISSION AND WAIVER FOR FIELD TRIP PARTICIPATION

Dear Parent or Legal Guardian:

Your son/daughter is scheduled to participate in a parish-sponsored activity. This activity will take place under the guidance and supervision of Mrs. Adalene Noll, Coordinator of Parish Religious Formation at Saint Theresa Parish. A brief description of the activity follows:

Name of Event: **First Penance Retreat**

Destination: **St. Theresa Church**

Designated Supervisor of Activity: **Adalene Noll**

Date and Time of Event:

Miss Roos – Thursday, January 7, 12:30-2:30 PM

Mrs. Ford – Friday, January 8, 12:30-2:30 PM

Religious Education – Saturday, January 23, 10:00 AM - 12:00 PM

CONSENT AND WAIVER

I hereby request the participation of my child, _____, in the event described above. I understand that this event will take place on the parish grounds and that my child will be under the supervision of the designated parish employee/volunteer on the stated dates.

I hereby agree, on behalf of the named student and his/her other parent or legal guardians, to waive any claims for liability against this parish, the Diocese of Harrisburg (and any diocesan or parish officers, agents, or employees) which may arise from the participation of the named student in the above-described event.

My child has special medical concerns. No ____ Yes ____ (If yes, please describe.)

By typing your name below, you understand that you are electronically signing this document and are agreeing to all the policies, terms, and conditions set forth above.

Parent’s Name: _____ Date: _____

Phone numbers where you can be reached during the event: _____
